

A-Bomb Survivors in U.S.

Nisei Victims Living With Pain and Trauma

By EDDIE IWATA

Kaz Suyeishi had stepped outside to water her garden when the atomic bomb struck Hiroshima.

She recalls the silver B-29 floating across an azure sky, a tiny white object falling from the plane, then the sweeping flash of light. Two miles from the A-bomb's hypocenter, the American-born Suyeishi dove to the ground a second later to escape the overpowering surge of heat and radiation.

The house next door collapsed on her, but she dragged herself out of the debris and stared up at the darkened sky. Then her parents, who had been in the back yard, appeared.

"My mother looked like a ghost," said Suyeishi in broken English. "Her hair stuck out at all angles and her whole body was grayish. My father had third-degree burns, and the next day his skin turned to a chocolate color."

102,000 Dead

Suyeishi was one of several thousand Japanese-Americans living in Hiroshima and Nagasaki in August, 1945, when the first A-bombs decimated those cities. The two attacks killed an estimated total of 102,000 persons, some incinerated by the blasts and others felled by flash burns and deadly radiation fallout. Tens of thousands more perished in the following months from radiation poisoning.

The great majority of Japanese-Americans caught in Hiroshima and Nagasaki were Nisei (second-generation) studying or working in Japan while their immigrant parents remained in the United States. Some Nisei left America to escape racial discrimination, and World War II relocation. In a cruel twist, they found themselves mistrusted and interrogated by Japanese authorities who suspected the Nisei of spying for America.

Hardships Linger

The exact number of Japanese-Americans who died in the nuclear holocausts is unknown, but some 500 to 700 known survivors trickled back to the United States, mainly to California and Hawaii.



Kaz Suyeishi tries to help A-bomb survivors in the U. S.

Thirty-six years later, their physical, emotional and financial hardships still linger, according to Suyeishi, now a Los Angeles housewife and vice president of the Committee of Atomic Bomb Survivors (CABS), a West Coast support group for survivors.

"We're not happy to say we are *hibakusha* (explosion-affected persons)," said the 54-year-old Suyeishi, a Pasadena native. "We want to forget, but something always reminds us and takes us back 30, 35 years."

Steady back pain, anxiety attacks and nightmares afflict Suyeishi, a slim, short-haired woman who bears no outward physical scars from the bombing.

Other survivors absorbed higher doses of radiation and remain susceptible to leukemia, various cancers (breast, lung and thyroid) and other radiation-related illnesses, according to CABS.



GARY FRIEDMAN / Los Angeles Times

Paul Enseki is active on the behalf of A-bomb survivors.

Even *hibakusha* without obvious physical ailments carry fears of not knowing the long-term effects of the radiation. Then, when any illness surfaces, they immediately link it in their minds to the A-bomb explosion.

"Survivors recall the terrible injuries, deaths and aftereffects of the bombings, and they cannot help but interpret their symptoms to their experiences," observed Los Angeles County Chief Coroner Thomas Noguchi, who coordinated a 1973 study of Southern California survivors for the old Atomic Bomb Casualty Commission. "Any symptom to a survivor is possibly a sign of death."

Equally as damaging is the stigma attached to A-bomb survivors, many of whom are ostracized in Japan. In this country, older *hibakusha* lead quiet lives of secrecy, rarely admitting their pasts to friends or employers. (CABS estimates 100 to

300 undeclared survivors live in the United States.)

Suyeishi also cites several cases where medical insurance companies dropped physically healthy survivors from insurance plans after discovering their status.

In addition, many survivors are hit by medical expenses for frequent checkups and other costly treatment. One survivor faced nearly \$17,000 in medical bills over the past five years. Another *hibakusha*,

a respected doctor, refuses to speak up for fear of losing his benefits.

In Japan, an estimated 350,000 eligible survivors are granted free medical care through a national law enacted in 1957. The Japanese Supreme Court also ruled three years ago that survivors from foreign countries were entitled to medical treatment at the government's expense.

No Laws Adopted

Japanese-American *hibakusha* are not so fortunate. Since 1972, U.S. congressmen introduced several bills attempting to secure medical assistance for American survivors of Hiroshima and Nagasaki, but no laws were adopted. The most recent bill, sponsored by Rep. George Danielson (D-Los Angeles), proposes to pay for treatment not covered by survivors insurance or other compensation.

Proponents remain frustrated over the lack of support for the bill, which they estimate would provide about \$500,000 yearly in benefits.

"Logic and rationality have nothing to do with this," said Paul Tsuneishi, head of a Japanese American Citizens League fundraising committee for the survivors. "I don't know of anyone who's not supportive of the concept, but no one wants to provide the time and money."

"The ironic thing is that the American government, since World War II, has participated with the Japanese government in providing medical care for Japanese citizens."

Tsuneishi spoke at a recent pot-

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luck gathering of A-bomb survivors in a Little Tokyo temple.

The San Fernando resident speculated that passage of the *hibakusha* bill would set several legislative precedents, including government compensation for American veterans possibly damaged by nuclear testing. "It would break new ground, it would open the door," admitted Tsuneishi.

Thirty or so survivors attended this luncheon, and many were middle-aged women who spoke little English. "You're talking about survivors who are predominantly women, since Nisei men were pressed into service," explained Tsuneishi. "The Japanese culture taught these women not to be assertive, and to expect them to come out and fight for their rights is unrealistic, even today."

"At a time when so many other groups—gays, minorities, the handicapped—are speaking out, it's difficult for many of these women to come out of the closet."

One woman who did help publicize the survivors' plight was CABS spokeswoman Judy Enseki. The San Joaquin Valley native died in August, 1980, after lengthy bouts with anemia and cancer of the colon.

Circumstances Enseki could not fight brought her to Hiroshima in the 1940s, explained her son, Paul Enseki, who was 2 years old at the time.

'American at Heart'

"She wasn't exactly comfortable about the idea of going to Japan," said Enseki, now an architect residing in Hollywood. "Her entire family lived here. Japanese wasn't her native tongue. And culturally, she wasn't acclimated to Japan. She was an American at heart."

Her husband, though, professed loyalty to his family and cultural homeland and the Ensekis traveled to Hiroshima after their release in 1944 from Manzanar.

"Neither my mother or her brother, who were both American-educated, seriously thought the war would last much longer," Enseki said. "They were witness to the technology, the energy, the total power of the U.S."

That military and technical supremacy climaxed at 8:15 a.m. on Aug. 6, 1945 in Hiroshima. In a matter of seconds, a 12.5 kiloton A-bomb nicknamed "Little Boy" destroyed virtually every standing building within 5.1 square miles of its hypocenter. An estimated 60% of Hiroshima's population was within 1.2 miles of the blast-center.

The nuclear attacks on Hiroshima and Nagasaki hatched traumatic psychological conditions for survivors. Many testified they could not distinguish between life and death, reality and dreaming, in the nightmarish days following the bombings.

Survivors carried images of grotesque death, and many experienced "psychic numbing," a state where they felt no emotions for weeks. Former Yale psychiatrist Robert Jay Lifton noted that only the survivors of Nazi concentration camps suffered comparable psychological terrors.

Research Is Slow

But doctors and scientists still question the physical aftereffects of survivors. Special A-bomb hospitals and medical research institutes were established in Hiroshima and Nagasaki shortly after the war, but research has been slow and painstaking. (One researcher believes that studies of survivors are less than half finished, and will continue past the year 2,000.)

According to scientific literature, 36 years of study has determined that radiation effects are clearly dose-dependent, or determined by exposure. But recent research has rocked even that conclusion.

A study at the Lawrence Livermore Weapons Laboratory found that cancer may be caused by much lower levels of radiation exposure than scientists currently believe, according to a Science magazine article this month.

If the findings are accurate, the risk of dying of cancer after exposure to low-level gamma radiation could double, and the chance of contracting cancer could quadruple, Science reported.

Physicists William Loewe and Edgar Mendelsohn constructed a computer model of the Hiroshima and Nagasaki atomic explosions. Their statistics show that low LET (linear energy transfer) radiation induced most of the cancer caused by the A-bomb, suggesting this common form of radiation is more dangerous than scientists now believe.

In recent weeks, other radiation specialists have focused on Japanese-American survivors. A team of Japanese doctors examined more than 200 *hibakusha* on the West Coast as part of a continuing Japanese government study.

At the Wadsworth Veterans Hospital in West Los Angeles, Dr. Takashi Makinodan hopes to pinpoint the influence of radiation in the immune system. The study for the U.S. Department of Energy involves 100 survivors.

"The problem is we're trying to look for radiation fingerprints 30-odd years later," explains Makinodan. "A lot of things we don't know about happened in between."

The researcher's detective work is further stymied by

many survivors who refuse to participate in medical studies. "They feel used, like guinea pigs," said Kaz Suyeishi.

Other *hibakusha* find themselves on a diagnostic treadmill, hopping from doctor to doctor with little hope of a remedy.

Teri Morinaka, a West Los Angeles seamstress, endures almost daily pain. "When I returned from Hiroshima to the United States in 1950, I got very sick," she said. "I was dizzy, rundown. I needed blood transfusions, and the doctor thought I had leukemia. Now I'm still dizzy and I get headaches all the time."

Two months ago, Morinaka developed numbness and pain in her hands and arms. Although bone and nerve specialists could not locate the problem, Morinaka believes her ailments stem from the A-bomb.

"I used to ignore the pains and take some aspirin," she said. "If I'm well, I can forget about it all. But every day I get sick and that always reminds me of Hiroshima."